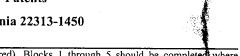
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent advance orders and notification of maintenance fees will be mailed to the completed where

indicated unless correct maintenance fee notifica	ied below or directed ot	herwise in Block I, by (	a) specifying a new co	rrespondence a	ddress; and/	or (b) indicating a sepa	rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
WORKMAN I 60 EAST SOUT 1000 EAGLE G	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
SALT LAKE C	ITY, UT 84111						(Depositor's name)
				<del></del>			(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	DRNEY DOCKET NO.	CONFIRMATION NO.
10/694,639 TITLE OF INVENTION	10/27/2003 I: RAISED SURFACE A	SSAY PLATE	Michael Cima			16687.33	5317
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAII	O ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300		\$0	\$1020	11/25/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS	<u> </u>			
BEISNER, V	VILLIAM H	1797	435-040520				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, altern (2) the name of a sin registered attorney of	of a single firm (having as a member a orney or agent) and the names of up to latent attorneys or agents. If no name is			
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIC TRANSFORM P	ess an assignee is identi h in 37 CFR 3.11. Comp GNEE HARMACEUTICAL	S, INC.	data will appear on the Γ a substitute for filing: (B) RESIDENCE: (CI	patent. If an an assignment. TY and STATE Lexingto	or count on, MA	ΓRY)	cument has been filed for
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governme  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  Issue Fee A check is enclosed.  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies Payment of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-3178 (enclose an extra copy of this form)							hown above)
a. Applicant claims OTE: The Issue Fee and	sus (from status indicated s SMALL ENTITY statu d Publication Fee (if requ	s. See 37 CFR 1.27.	from anyone other tha			FITY status. See 37 CFI attorney or agent; or the	R 1.27(g)(2).
Authorized Signature  Typed or printed name  JOHN M. GUYNN  Date  October  Registration No. 36,153							
his collection of informa n application. Confident ubmitting the completed nis form and/or suggestion tox 1450, Alexandria, V	11gma 44515-1450. DO	FR 1.311. The information U.S.C. 122 and 37 CFR 1 USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	n is required to obtain c .14. This collection is depending upon the in Chief Information Off OMPLETED FORMS	r retain a benef estimated to tak lividual case. A	it by the pub e 12 minutes my comment	ic which is to file (and less to complete, including son the amount of time	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O. or Patents, P.O. Box 1450,

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